Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Document Page 1 of 57

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Gina First name M. Middle name	First name Middle name	_
	Bring your picture identification to your meeting with the trustee.	James-Skrobo Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	_
2.	All other names you ha used in the last 8 years Include your married or maiden names.	ve FKA Gina James		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7430		

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Document Page 2 of 57

Case number (if known)

Debtor 1 Gina M. James-Skrobo

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	6101 W. 99th St.	If Debtor 2 lives at a different address:
		Oak Lawn, IL 60453 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Document Page 3 of 57

Case number (if known) Debtor 1 Gina M. James-Skrobo

ar	Tell the Court About	Your E	Bankruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are				n of each, see North			342(b) for Individuals Fi	iling for Bankruptcy
	choosing to file under	☐ Chapter 7 ☐ Chapter 11							
			Chapter 12						
			Chapter 13						
3.	How you will pay the fee	•	about how your order. If your a pre-printed	u may pay. Ty attorney is sub address.	pically, if you are mitting your pay	e paying the ment on you	fee yourself, you n ur behalf, your atto	erk's office in your local nay pay with cash, cash rney may pay with a cre	nier's check, or money edit card or check with
					stallments. If youts (Official Form		s option, sign and	attach the Application for	or Individuals to Pay
			I request that but is not req	t my fee be wa uired to, waive	aived (You may your fee, and m	request this	ly if your income is	are filing for Chapter 7. less than 150% of the s). If you choose this op	official poverty line that
								3B) and file it with your	
Э.	Have you filed for bankruptcy within the	■ N							
	last 8 years?	ΠY							
			District			When		_ Case number	
			District			When		_ Case number	
			District			When		Case number	
10.	Are any bankruptcy cases pending or being	■ N	0						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ПΥ	es.						
			Debtor					Relationship to you	
			District			When		Case number, if known	n
			Debtor					Relationship to you	
			District			When		Case number, if known	n
11.	Do you rent your residence?	■ N	o. Go to I	ine 12.					
		ΠY	es. Has yo	ur landlord obt	ained an evictio	n judgment a	against you?		
				No. Go to line	12.				
				Yes. Fill out Ir this bankrupto		About an Ev	iction Judgment Ag	gainst You (Form 101A)	and file it as part of

Deb	Case 18-0		Doc 1	Filed 04/05/18 Document	Entered 04/05/18 12:57:28 Page 4 of 57 Case number (if known)	Desc Main
Par	Report About Any Bu	ısinesses '	You Own as	s a Sole Proprietor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Pa	art 4.		
		☐ Yes.	Name ar	nd location of business		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of	business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Number,	, Street, City, State & ZIP	Code	
	it to this petition.		Check th	ne appropriate box to des	cribe your business:	
			□ +	Health Care Business (as	defined in 11 U.S.C. § 101(27A))	
				Single Asset Real Estate	(as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as defined in	n 11 U.S.C. § 101(53A))	
				Commodity Broker (as de	fined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	déadlines operation	s. If you indic s, cash-flow .C. 1116(1)(cate that you are a small ly statement, and federal in (B).	ust know whether you are a small business de business debtor, you must attach your most re ncome tax return or if any of these documents	ecent balance sheet, statement of
	For a definition of small	■ No.	I am not	filing under Chapter 11.		

Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

business debtor, see 11

U.S.C. § 101(51D).

Part 4:

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

INO.	

☐ No.

☐ Yes.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main

Document Page 5 of 57

Debtor 1 Gina M. James-Skrobo

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Gina M. James-Skrobo

Document Page 6 of 57

Case number (if known)

Part	6: Answer These Questi	ons for Re	eporting Purposes							
16.	What kind of debts do you have?	16a.	Are your debts primarily consumindividual primarily for a personal,	mer debts? Consumer debts are defined family, or household purpose."	in 11 U.S.C. § 101(8) as "incurred by an					
			☐ No. Go to line 16b.							
			Yes. Go to line 17.							
		16b.	b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
			☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.							
		16c.	State the type of debts you owe th	nat are not consumer debts or business de	ebts					
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go to line 18.							
	Do you estimate that after any exempt property is excluded and	☐ Yes.		ou estimate that after any exempt property le to distribute to unsecured creditors?	is excluded and administrative expenses					
	administrative expenses are paid that funds will		□ No							
	be available for distribution to unsecured creditors?		□Yes							
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000					
19.	How much do you estimate your assets to be worth?	\$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion					
20.	How much do you estimate your liabilities to be?	\$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion					
Part	:7: Sign Below									
For	you	If I have of United St If no attor documen I request I understate bankrupto and 3571 /s/ Gina	thosen to file under Chapter 7, I an ates Code. I understand the relief at the represents me and I did not part, I have obtained and read the not relief in accordance with the chapter and making a false statement, concey case can result in fines up to \$25. M. James-Skrobo	under penalty of perjury that the information aware that I may proceed, if eligible, uncavailable under each chapter, and I choose ay or agree to pay someone who is not an ice required by 11 U.S.C. § 342(b). er of title 11, United States Code, specified cealing property, or obtaining money or proceeding to the property of the prope	der Chapter 7, 11,12, or 13 of title 11, e to proceed under Chapter 7. attorney to help me fill out this d in this petition. operty by fraud in connection with a					
		Signature	James-Skrobo of Debtor 1	Signature of Debtor 2						
		Executed	on April 5, 2018 MM / DD / YYYY	Executed on MM / Di	D / YYYY					

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Document Page 7 of 57

Debtor 1 Gina M. James-Skrobo Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Molly C. Stojanov	Date	April 5, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Molly C. Stojanov		
Printed name		
M.C. Law Group, P.C.		
Firm name		
494 W. Boughton Road		
Suite 2A		
Bolingbrook, IL 60440		
Number, Street, City, State & ZIP Code		
Contact phone (630) 312-8677	Email address	support@mclawgroup.net
6283116 IL		
Bar number & State		

		Docume	ent Page 8 of 57	
Fill in this infor	mation to identify your	case:		
Debtor 1	Gina M. James-S	krobo		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				□ CH
				ar

Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	115,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	185,550.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	300,550.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	28,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	100,604.24
	Your total liabilities	\$	128,604.24
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,781.39
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,980.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
	■ Yes		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Case 18-09975 Doc 1 Document

Page 9 of 57
Case number (if known) Debtor 1 Gina M. James-Skrobo

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

7,976.41 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	24,938.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	24,938.00

	1	Case 18-099	975 Doc		04/05/18 ument	Entered 04/05/18	3 12:57:28	Desc	Main
ill	in this in	ormation to iden	tify your case a			1 MM. 10/ (11.57)			
Deb	otor 1	Gina M. J	ames-Skrobo	Middle Name		Last Name			
	otor 2 use, if filing)	First Name		Middle Name		Last Name			
Unit	ted States	Bankruptcy Court	for the: NOR	THERN DIST	RICT OF ILLIN	IOIS			
Cas	se number					-			Check if this is an amended filing
_		orm 106A							
<u>Sc</u>	ched	ule A/B:	Propert _i	у					12/15
nfor	mation. If r	nore space is need uestion.	ed, attach a sepa	rate sheet to th	nis form. On the	e are filing together, both are e top of any additional pages, v rn or Have an Interest In			
D	o vou own	or have any legal o	r equitable intere	et in any resid	ence huilding	land, or similar property?			
	_		r equitable ilitere	st iii aliy lesiu	ence, building,	iana, or similar property:			
_	No. Go to								
	Yes. Whe	re is the property?							
1.1				What	is the property	? Check all that apply			
		. 99th St.	. do o o sintio o	□	Single-family h	nome			s or exemptions. Put
	Street addr	ess, if available, or other	description		Duplex or mult Condominium	i-unit building or cooperative			aims on <i>Schedule D:</i> Secured by Property.
	Oak La	wn IL	60453-00	000 🗆	Manufactured Land	or mobile home	Current value of t entire property?		current value of the ortion you own?
	City	Sta	ite ZIP Code		Investment pro	pperty	\$115,000	0.00	\$115,000.00
					Timeshare Other				ownership interest y by the entireties, or
				Who		in the property? Check one	a life estate), if kr	•	y by the entireties, or
					Debtor 1 only				
	Cook			□	Debtor 2 only	•			
	County				Debtor 1 and [Debtor 2 only	☐ Check if this	is commu	nity property
						the debtors and another	(see instructions		, r - r - ,
					r information yo erty identification	ou wish to add about this item on number:	such as local		

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

pages you have attached for Part 1. Write that number here......>>

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases.*

Part 2: Describe Your Vehicles

\$115,000.00

Deb	tor 1 Gina N	I. James-Skr	obo	Documen	t Page 11	OT 5 / Case	number (if known)		
3. C a	ars, vans, truck	s, tractors, sp	ort utility veh	nicles, motorcycles					
	No								
	Yes								
	Cha	overalat					Do not deduct see	cured claim	s or exemptions. Put
3.1		evrolet		_	t in the property? Che	eck one	the amount of any	secured c	laims on Schedule D:
	Model: Cru			■ Debtor 1 only □ Debtor 2 only					Secured by Property.
	Approximate mi		454	Debtor 1 and Deb	otor 2 only		Current value of entire property?		Current value of the portion you own?
	Other information	on:		_	e debtors and another				
							\$18,60	0.00	\$18,600.00
				Check if this is constructions (see instructions)	community property		Ψ10,00		φ10,000.00
5 A .p	ages you have 3: Describe You	attached for P ir Personal and e any legal or	Part 2. Write the Household Ite equitable into	n for all of your entr hat number here ms erest in any of the f				po i Do	\$18,600.00 Trent value of the tion you own? not deduct secured ms or exemptions.
E		appliances, fur		china, kitchenware					
		Misc	ellaneous h	ousehold items					\$500.0
E	includ No	ing cell phones		eo, stereo, and digital edia players, games	equipment; comput	ters, printers, s	scanners; music o	collections	s; electronic devices
	Yes. Describe								
E		es and figurine collections, me		orints, or other artwor lectibles	k; books, pictures, o	or other art obj	ects; stamp, coin	ı, or basek	pall card collections;
E				d other hobby equipn	nent; bicycles, pool	tables, golf clu	ıbs, skis; canoes	and kaya	ks; carpentry tools;
	No Yes. Describe								
_	Firearms Examples: Pisto I No	ls, rifles, shotg	uns, ammuniti	ion, and related equip	pment				
	No Yes. Describe								

Official Form 106A/B Schedule A/B: Property page 2

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Page 12 of 57
Case number (if known) Document Debtor 1 Gina M. James-Skrobo 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$50.00 Personal used clothing. 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$550.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... \$2,000.00 Checking account with Chase 17.1. Savings account with United Credit Union \$2,200.00 17.2 \$200.00 Savings account with Chase 17.3. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No

Institution or issuer name: ☐ Yes.....

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

■ No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

		Case 18-	09975	Doc 1	Filed 04/05/18 Document	Entered 04/05/18 12:57:28	Desc Main
De	ebtor 1	Gina M. Jan	nes-Skrob	0	Document	Page 13 of 57 Case number (if known)	
20.	Negoti Non-ne ■ No	iable instruments	s include per nents are the ormation ab	rsonal check ose you can	negotiable and non-ness, cashiers' checks, pror		
21.	Examp □ No	nent or pension bles: Interests in List each accoun	IRA, ERISA	-	1(k), 403(b), thrift saving	s accounts, or other pension or profit-sharing រុ	plans
	- res.	List each accou		account:	Institution n	ame:	
					401k		\$162,000.00
22.	Your s Examp ■ No		ed deposits	you have ma	rent, public utilities (elec	tinue service or use from a company etric, gas, water), telecommunications compan ame or individual:	ies, or others
23.	Annuit	ies (A contract f	or a periodic	payment of	money to you, either for	life or for a number of years)	
	■ No □ Yes	ls	ssuer name	and descript	ion.		
24.		s in an educati C. §§ 530(b)(1),				gram, or under a qualified state tuition pro	gram.
	☐ Yes	lr	nstitution nar	me and desc	cription. Separately file th	ne records of any interests.11 U.S.C. § 521(c):	
25.	■ No	equitable or fu			erty (other than anythin	g listed in line 1), and rights or powers exe	rcisable for your benefit
26.	Examp ■ No	s, copyrights, to ples: Internet dor Give specific in	main names	, websites, p	ets, and other intellectu roceeds from royalties a	al property nd licensing agreements	
	Examp ■ No	es, franchises, ples: Building pe Give specific in	rmits, exclus	sive licenses		n holdings, liquor licenses, professional license	es
M	oney or	property owed	to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	■ No	funds owed to y		out them, in	cluding whether you alrea	ady filed the returns and the tax years	
29.		support oles: Past due or	· lump sum a	alimony, spo	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement

☐ Yes. Give specific information.....

Case 18-09975 Filed 04/05/18 Entered 04/05/18 12:57:28 Page 14 of 57

Case number (if known) Document Debtor 1 Gina M. James-Skrobo 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Term life insurance through employer \$0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$166,400.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00

Doc 1

Desc Main

Page 15 of 57
Case number (if known) Document Debtor 1 Gina M. James-Skrobo

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$115,000.00
56.	Part 2: Total vehicles, line 5	\$18,600.00		
57.	Part 3: Total personal and household items, line 15	\$550.00		
58.	Part 4: Total financial assets, line 36	\$166,400.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$185,550.00	Copy personal property total	\$185,550.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$300,550.00

Official Form 106A/B Schedule A/B: Property page 6

		I A A A HIII.	111111111111111111111111111111111111111	
Fill in this infor	mation to identify your	case:		
Debtor 1	Gina M. James-S	krobo		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(if known)				Check if this
				amended fili

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	otions are	you claiming?	Check one only	, even if	your spouse is	s filing with	you.
----	--------------------	------------	---------------	----------------	-----------	----------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
6101 W. 99th St. Oak Lawn, IL 60453 Cook County	\$115,000.00	-	\$15,000.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2018 Chevrolet Cruz 454 miles Line from Schedule A/B: 3.1	\$18,600.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line Holli Schedule AVB. 3.1			100% of fair market value, up to any applicable statutory limit	
Miscellaneous household items Line from Schedule A/B: 6.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Line Holli Schedule AVB. 0.1			100% of fair market value, up to any applicable statutory limit	
Personal used clothing.	\$50.00		\$50.00	735 ILCS 5/12-1001(a)
Line from Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
Checking account with Chase Line from Schedule A/B: 17.1	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(b)
Line Irom Scheaule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Document Page 17 of 57

De	Gina W. James-Skrobo			Case number (ii known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Savings account with United Credit Union	\$2,200.00		\$1,300.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	Savings account with Chase Line from Schedule A/B: 17.3	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
	Line nom Schedule AVB. 17.0			100% of fair market value, up to any applicable statutory limit	
	401k Line from Schedule A/B: 21.1	\$162,000.00		\$162,000.00	735 ILCS 5/12-1006
	Line nom Schedule AVB. 2111			100% of fair market value, up to any applicable statutory limit	
	Term life insurance through employer	\$0.00		\$0.00	215 ILCS 5/238
	Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmer	nt.)
	Yes. Did you acquire the property cover	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No			, ,	
	☐ Yes				

Case 18-09975		Entered 04/05/18 12: age 18 of 57	57:28 Desc	Main
Fill in this information to identify you				
Debtor 1 Gina M. James	Skrobo			
First Name		Name	-	
Debtor 2 (Spouse if, filing) First Name	Middle Name Last	Name	-	
United States Bankruptcy Court for the	: NORTHERN DISTRICT OF ILLINOI	S	_	
Case number			☐ Chec	ck if this is an
			_	nded filing
Official Form 106D				
	s Who Have Claims Sec	cured by Propert	У	12/15
	If two married people are filing together, bo out, number the entries, and attach it to this			
. Do any creditors have claims secured b	y your property?			
☐ No. Check this box and submit t	his form to the court with your other sche	dules. You have nothing else	to report on this form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
	more than one secured claim, list the creditor s	Column A	Column B	Column C
	s a particular claim, list the other creditors in Pa		Value of collateral that supports this claim	Unsecured portion If any
2.1 Suntrust	Describe the property that secures the cl		\$18,600.00	
Creditor's Name	2018 Chevrolet Cruz 454 miles			
Po Box 791144	As of the date you file, the claim is: Check apply.	all that		
Baltimore, MD 21279	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortg	age or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic	s's lien)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in 0	Column A on this page. Write that number h	ere: \$28,00	00.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

If this is the last page of your form, add the dollar value totals from all pages.

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$28,000.00

Write that number here:

	0000 10 00010 1	Document	Page 19 of 57	COO MAIN
Fill in this i	information to identify your			
Debtor 1	Gina M. James-SI	roho		
DODIOI 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing	g) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS	
Case numb	er			
(if known)				Check if this is an
				amended filing
Official F	Form 106E/F			
		ho Have Unsecured	Claims	12/15
			TY claims and Part 2 for creditors with NONPRIORITY c	
Schedule G: Schedule D: (Schedule D: (left. Attach th	Executory Contracts and Unexp Creditors Who Have Claims Sec	ired Leases (Official Form 106G). I ured by Property. If more space is	list executory contracts on Schedule A/B: Property (Off Do not include any creditors with partially secured clair needed, copy the Part you need, fill it out, number the eport in a Part, do not file that Part. On the top of any ad	ms that are listed in entries in the boxes on the
Part 1: L	ist All of Your PRIORITY Un	secured Claims		
1. Do any o	creditors have priority unsecure	d claims against you?		
No. G	Go to Part 2.			
☐ Yes.				
Part 2:	ist All of Your NONPRIORIT	Y Unsecured Claims		
3. Do any o	creditors have nonpriority unsec	cured claims against you?		
□ No. Y	ou have nothing to report in this p	art. Submit this form to the court with	your other schedules.	
Yes.				
unsecure	ed claim, list the creditor separately	y for each claim. For each claim lister	he creditor who holds each claim. If a creditor has more to d, identify what type of claim it is. Do not list claims already have more than three nonpriority unsecured claims fill out to	included in Part 1. If more
				Total claim
	l Physical Therapy	Last 4 digits of acc	count number	\$423.18
	priority Creditor's Name Box 371863	When was the deb	at incurred?	
Pit	tsburgh, PA 15250			
Nun	nber Street City State Zlp Code	As of the date you	file, the claim is: Check all that apply	
Who	o incurred the debt? Check one.			
= [Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and and	other Type of NONPRIOR	RITY unsecured claim:	
	Check if this claim is for a com			
deb Is th	t ne claim subject to offset?	Obligations arisi report as priority cla	ng out of a separation agreement or divorce that you did no	ot
is u	•		n or profit-sharing plans, and other similar debts	
		•	1 7	
ο,	Yes	Other. Specify	medical	_

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Page 20 of 57 Case number (if know) Document Debtor 1 Gina M. James-Skrobo 4.2 \$6,078.00 Capital One Last 4 digits of account number 3068 Nonpriority Creditor's Name Opened 03/04 Last Active Po Box 30281 When was the debt incurred? 2/16/18 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.3 **Chase Card** Last 4 digits of account number 6461 \$7,897.00 Nonpriority Creditor's Name Opened 04/17 Last Active Po Box 15298 When was the debt incurred? 2/16/18 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.4 **Chase Card** Last 4 digits of account number 7637 \$3.585.00 Nonpriority Creditor's Name Opened 06/17 Last Active Po Box 15298 When was the debt incurred? 2/16/18 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.

Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Case 18-09975

Page 21 of 57 Case number (if know) Document Debtor 1 Gina M. James-Skrobo

Po Box 15316 Wilmington, DE 19850 Number Stree City State 2 D Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only State Claim subject to offset? No Check if this claim is for a community debt. Electrostim Nonprinty Creditors Name 3504 Cragmont Dr. Tampa, FL 33619 Number Stree City State 2 D Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Who was the debt incurred? As of the date you file, the claim is Check all that apply Month of the claim subject to offset? Credit Card Credit Card Last 4 digits of account number Who was the debt incurred? As of the date you file, the claim is Check all that apply Who was the debt incurred? As of the date you file, the claim is Check all that apply Who was the debt incurred? As of the date you file, the claim is Check all that apply Who was the debt incurred? As of the date you file, the claim is Check all that apply Who was the debt incurred? As of the date you file, the claim is Check all that apply Who was the debt incurred? As of the date you file, the claim is Check all that apply Who was the debt incurred? As of the date you file, the claim is Check all that apply Who was the debt incurred? As of the date you file, the claim is Check all that apply Who was the debt incurred? As of the date you file, the claim is Check all that apply Who was the debt incurred? As of the date you file, the claim is Check all that apply Who was the debt incurred? Student Sana Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1	4.5	Discover Fin Svcs Llc Nonpriority Creditor's Name	Last 4 digits of account number		\$13,291.00
Debtor 1 only		Po Box 15316	When was the debt incurred?		
Debtor 2 only Disputed Disp		Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Student		Debtor 1 only	☐ Contingent		
At least one of the debtors and another Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim subject to offset? Check if this claim subject to offset? Credit Card		☐ Debtor 2 only	☐ Unliquidated		
Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority Creditor's Name S364.00		☐ Debtor 1 and Debtor 2 only	☐ Disputed		
Collegations arising out of a separation agreement or divorce that you did not report as priority claims Non-priority Creditor's Name Sa65.00		☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Is the claim subject to offset? Note					
Selectrostim				ration agreement or divorce that you did not	
Last 4 digits of account number \$365.00			<u></u>	g plans, and other similar debts	
Nonpriority Creditor's Name 3504 Cragmont Dr. Tampa, FL 33619 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only State Zip Code Non Commonder Street City State Zip Code Nonpriority Creditor's Name Nonpriority Cre		Yes	Other. Specify Credit Card	<u> </u>	
3504 Cragmont Dr. Tampa, FL 33619 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only	4.6		Last 4 digits of account number		\$365.00
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts 1 opension or profit-sharing plans, and other similar debts As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Student loans When was the debt incurred? Opened 10/98 Last Active 2/13/18 As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts		3504 Cragmont Dr.	When was the debt incurred?		
Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts No Debts to pension or profit-sharing plans, and other similar debts No Depts to pension or profit-sharing plans, and other similar debts No Depts to pension or profit-sharing plans, and other similar debts No Depts to pension or profit-sharing plans, and other similar debts No Depts to pension or profit-sharing plans, and other similar debts No Depts to pension or profit-sharing plans, and other similar debts No Depts to pension or profit-sharing plans, and other similar debts No Depended 10/98 Last Active 2/13/18 As of the date you file, the claim is: Check all that apply When was the debt incurred? At least or of the debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debts of Debts and another Check if this claim is for a community debt Student loans Debts to pension or profit-sharing plans, and other similar debts		· · · · · · · · · · · · · · · · · · ·	As of the date you file, the claim	is: Check all that apply	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No		■ Debtor 1 only	☐ Contingent		
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is check and the claim is claim is claim is claim is check and th		Debtor 2 only	☐ Unliquidated		
Check if this claim is for a community debt Check if this claim subject to offset? Check if this claim subject to offset? Contingent Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check in the claim subject to offset?		Debtor 1 and Debtor 2 only	☐ Disputed		
debt State claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Medical A7		\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Is the claim subject to offset? No			Student loans		
No				aration agreement or divorce that you did not	
A.7 Kohls/capone		•	<u></u>	g plans, and other similar debts	
Nonpriority Creditor's Name N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Debtor 1 onfset Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community claims Debtor 3 only Debtor 4 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Debtor 3 only Check if this claim is for a community claims Debtor 4 only Disputed Type of NONPRIORITY unsecured claim: Debtor 5 only Check if this claim is for a community claims Debtor 5 only Check if this claim is for a community claims Debtor 6 only Check in the claim subject to offset? Debtor 6 only Check all that apply No Debtor 1 only Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Debtor 3 only Check in this claim is check all that apply		Yes	Other. Specify medical		
N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Copened 10/98 Last Active 2/13/18 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	4.7		Last 4 digits of account number	7041	\$1,877.00
Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply Contingent Unliquidated Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		N56 W 17000 Ridgewood Dr	When was the debt incurred?	- 1	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		•	As of the date you file, the claim	is: Check all that apply	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		■ Debtor 1 only	☐ Contingent		
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		☐ Debtor 2 only	☐ Unliquidated		
☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? ☐ Debts to pension or profit-sharing plans, and other similar debts		☐ Debtor 1 and Debtor 2 only	☐ Disputed		
debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims No □ Debts to pension or profit-sharing plans, and other similar debts		\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Is the claim subject to offset? ■ No □ Debts to pension or profit-sharing plans, and other similar debts					
■ No □ Debts to pension or profit-sharing plans, and other similar debts				aration agreement or divorce that you did not	
		•	<u></u>	g plans, and other similar debts	
· · · ————————————————————————————————		☐ Yes	Other. Specify Charge Acc	count	

Page 22 of 57 Case number (if know) Document Debtor 1 Gina M. James-Skrobo 4.8 \$82.00 Med Busi Bur Last 4 digits of account number 0514 Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? **Opened 07/14** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Midwest Anesthesia** Other. Specify Ltd ☐ Yes 4.9 Med Busi Bur Last 4 digits of account number 0517 \$75.00 Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? **Opened 10/14** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Midwest Anesthesia** ☐ Yes Other. Specify 4.1 Med Busi Bur 0518 \$75.00 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? **Opened 10/14** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify Ltd

☐ Debts to pension or profit-sharing plans, and other similar debts

Collection Attorney Midwest Anesthesia

Page 23 of 57 Case number (if know) Document Debtor 1 Gina M. James-Skrobo 4.1 Med Busi Bur 0520 \$72.00 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? **Opened 10/14** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Midwest Anesthesia** ☐ Yes Other. Specify 4.1 Med Busi Bur 0519 \$70.00 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? **Opened 10/14** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Midwest Anesthesia** ☐ Yes Other. Specify Ltd 4.1 Med Busi Bur 0516 \$70.00 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? **Opened 10/14** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify Ltd

Collection Attorney Midwest Anesthesia

Page 24 of 57 Case number (if know) Document Debtor 1 Gina M. James-Skrobo 4.1 Med Busi Bur 0521 \$68.00 Last 4 digits of account number 4 Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? **Opened 01/15** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Midwest Anesthesia** ☐ Yes Other. Specify 4.1 Med Busi Bur 0515 \$67.00 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? **Opened 10/14** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Midwest Anesthesia** ☐ Yes Other. Specify Ltd 4.1 Midwest Diagnostic Pathology \$88.00 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 578 When was the debt incurred? Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify medical

lacksquare Debts to pension or profit-sharing plans, and other similar debts

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Page 25 of 57 Case number (if know) Document Debtor 1 Gina M. James-Skrobo 4.1 **Nelnet Loans** 6649 \$21,698.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/05 Last Active 6420 Southpoint Pkwy When was the debt incurred? 2/16/18 Jacksonville, FL 32216 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 **Nelnet Loans** 6749 \$3,240.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 09/05 Last Active 6420 Southpoint Pkwy When was the debt incurred? 2/16/18 Jacksonville, FL 32216 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Educational

report as priority claims

Other. Specify

\$522.00

Is the claim subject to offset?

■ No
□ Yes

4.1

9

Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28

Case 18-09975 Desc Main Document Page 26 of 57 Case number (if know) Debtor 1 Gina M. James-Skrobo 4.2 Valic Financial Services \$22,760.69 Last 4 digits of account number 0 Nonpriority Creditor's Name 500 W. Madison #2850 When was the debt incurred? Chicago, IL 60661 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify 401k loan ☐ Yes 4.2 Valic Financial Services \$17,946.37 Last 4 digits of account number Nonpriority Creditor's Name 500 W. Madison #2850 When was the debt incurred? Chicago, IL 60661 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Other. Specify 401k loan ☐ Yes 4.2 Western Hills Medical \$254.00 Last 4 digits of account number Nonpriority Creditor's Name 4700 95th St. Suite 103 When was the debt incurred? Oak Lawn, IL 60453 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

 \square Obligations arising out of a separation agreement or divorce that you did not

lacksquare Debts to pension or profit-sharing plans, and other similar debts

Part 4: Add the Amounts for Each Type of Unsecured Claim

debt

■ No ☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify medical

Entered 04/05/18 12:57:28 Desc Main Case 18-09975 Doc 1 Filed 04/05/18 Page 27 of 57 Case number (if know) Document

Debtor 1 Gina M. James-Skrobo

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Tot	tal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	, c	6c.	·	
		Claims for death or personal injury while you were intoxicated		\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				To	tal Claim
	6f.	Student loans	6f.	\$	24,938.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	75,666.24
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	100,604.24

		12(1)	111 11111111111111111111111111111111111	
Fill in this infor	mation to identify your	case:		
Debtor 1	Gina M. James-S	krobo		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2	•				
	Name				_
	ivame				
	Number	Street			_
	City		State	ZIP Code	_
2.3	City		Otate	Zii Code	
2.3					_
	Name				
	Number	Street			_
	Number	Street			
	0.1		0, 1	710.0	_
	City		State	ZIP Code	
2.4					
	Name				
					_
	Number	Street			
					_
	City		State	ZIP Code	
2.5					
	Name				_
					_
	Number	Street			
	City		State	ZIP Code	

		Docume	ent Page 29 o)T 5 /	
Fill in this in	nformation to identify your				
Debtor 1	Gina M. James-Si	robo			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)) First Name	Middle Name	Last Name		
	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Office Otato	bankruptoy Court for the.	- NORTHER BIOTHO	0	_	
Case number (if known)	er				☐ Check if this is an
					amended filing
Official	Form 106H				
	ıle H: Your Cod	obtore			40/45
Scriedi	ne n. Tour Cou	EDIOI 3			12/15
■ No □ Yes 2. Withi Arizona, ■ No. G □ Yes.	n the last 8 years, have you, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spourn 1, list all of your codebte again as a codebtor only i	lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live	roperty state or territor erto Rico, Texas, Washi with you at the time?	y? (Community property ngton, and Wisconsin.)	states and territories include with you. List the person shown
Form 10 out Col	06D), Schedule E/F (Official			6G). Use Schedule D, S	chedule E/F, or Schedule G to fill
	me, Number, Street, City, State and ZI	P Code		Check all schedules	
3.1				_ Schedule D, line	
Na	ame			☐ Schedule E/F, lin	
				☐ Schedule G, line	
Nu Ci	umber Street ty	State	ZIP Code		
3.2				☐ Schedule D, line	
Na	ame			□ Schedule E/F, lin	
				☐ Schedule G, line	
Nu Ci	umber Street	State	ZIP Code	_	
Oi	"	Ciaio	211 0006		

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Document Page 30 of 57

Fill	in this information to identify your o	ase:						
Deb	otor 1 Gina M. Jan	nes-Skrobo			_			
	otor 2				_			
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS					
	se number own)		-				led filing nent showin	g postpetition chapter ollowing date:
Of	fficial Form 106I					MM / DD/	YYYY	· ·
So	chedule I: Your Inc	ome				111117 227		12/1
supį spoi attad	is complete and accurate as posolying correct information. If you use. If you are separated and you has separate sheet to this form. Describe Employment	ı are married and not filiı ur spouse is not filing wi	ng jointly, and your sith you, do not include	spouse i de infori	is liv matic	ing with you, inc on about your sp	lude infornouse. If mo	nation about your ore space is needed,
1.	Fill in your employment information.		Debtor 1			Debtor	2 or non-fi	iling spouse
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed □ Not employed			☐ Emp	oloyed employed	
	employers.	Occupation	Teacher					
	Include part-time, seasonal, or self-employed work.	Employer's name	Chicago Public	School				
	Occupation may include student or homemaker, if it applies.	Employer's address	10347 S. Ewing Oak Lawn, IL 60	453				
		How long employed to	here? 15 year	s				
Par	Give Details About Mo	nthly Income						
	mate monthly income as of the case unless you are separated.	late you file this form. If	you have nothing to re	port for	any l	ine, write \$0 in th	e space. Ind	clude your non-filing
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	n for all e	emplo	oyers for that pers	son on the li	nes below. If you need
						For Debtor 1		btor 2 or ing spouse
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	9,570.04	\$	N/A
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A

9,570.04

N/A

Calculate gross Income. Add line 2 + line 3.

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Document Page 31 of 57

Deb	tor 1	Gina M. James-Skrobo	-	(Case nu	umber (if kr	iown)				
					5 0 × 5	Nobton 1		Гог	Dobtos	2 0 "	
					FOR L	ebtor 1			Debtor -filing s		
	Copy	y line 4 here	4.		\$	9,570	0.04	\$		N/A	<u> </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$	2,319	50	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$		3.33	\$_		N/A	
	5c.	Voluntary contributions for retirement plans	50	: .	\$		0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50	d.	\$	C	0.00	\$_		N/A	_
	5e.	Insurance	5e	€.	\$	725	5.83	\$		N/A	
	5f.	Domestic support obligations	5f.		\$		0.00	\$_		N/A	_
	5g.	Union dues	5g		\$		3.32	\$_		N/A	_
	5h.	Other deductions. Specify: Credit Union (savings for summer)	_ 5h _	1.+	\$	1,516	5.67	+ \$_		N/A	<u>. </u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	4,788	3.65	\$_		N/A	<u>. </u>
7.	Calc	rulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	4,781	.39	\$_		N/A	<u>. </u>
8.	List a	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a	à.	\$	C	0.00	\$		N/A	
	8b.	Interest and dividends	8b).	\$	C	0.00	\$_		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$		0.00	\$		N/A	
	8d.	Unemployment compensation	80		\$—		0.00	\$ -		N/A	_
	8e.	Social Security	8e		\$ —		0.00	\$-		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$	C	0.00	\$		N/A	_
	8g.	Pension or retirement income	8g	J.	\$	C	0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$	C	0.00	+ \$		N/A	<u> </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	C	0.00	\$_		N/	A
10.	Calc	ulate monthly income. Add line 7 + line 9.	10.	\$	4.	781.39	+ \$		N/A	= \$	4,781.39
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					-,
11.	Inclu- other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your r friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not cify:	depe							e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							. 12.	\$	4,781.39
	_		_								ly income
13.	Do y	ou expect an increase or decrease within the year after you file this form	?								
		No.									-
	1 1	A DG = ADIGID.									I

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Document Page 32 of 57

Fill	in this information to identify your case:				
	otor 1 Gina M. James-Skrobo		Chack	; if this is:	
DCD	Gilla W. James-Skrobo			amended filing	
	otor 2				ving postpetition chapter the following date:
(Spc	ouse, if filing)		'	3 expenses as or	the following date.
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLII	NOIS		MM / DD / YYYY	
1	se numberknown)				
Of	fficial Form 106J				
Sc	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married people a ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.				
Par					
1.	Is this a joint case?				
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expense	es for Separate House	ehold of Debto	or 2.	
2.	Do you have dependents? ☐ No				
		Dependent's relati	ionship to	Dependent's	Does dependent
	Debtor 2. Yes. Fill out this information for each dependent	Debtor 1 or Debto		age	live with you?
	Do not state the				□ No
	dependents names.	Daughter		23	Yes
					□ No
		-			☐ Yes ☐ No
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include ■ No				
	expenses of people other than yourself and your dependents?				
	<u>·</u>				
Est exp	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a supplicable date.				
the	clude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I:</i> Ifficial Form 106I.)			Your expe	enses
•	·				
4.	The rental or home ownership expenses for your residence. payments and any rent for the ground or lot.	Include first mortgage	4. \$		0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		200.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		65.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as h 	nome equity loans	4d. \$ 5. \$		0.00
J.	, talantionian mortigage payments for your residence, SUCH as H	ionio oddity idalio	J. J		U.UU

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Document Page 33 of 57

80.00 60.00 200.00 0.00 300.00 200.00
60.00 200.00 0.00 300.00
60.00 200.00 0.00 300.00
200.00 0.00 300.00
0.00 300.00
300.00
200.00
0.00
0.00
200.00
200.00
0.00
0.00
0.00
0.00
225.00
0.00
0.00
0.00
0.00
0.00
250.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
200 00
00.08
00.08
A 781 20
4,781.39
1,980.00
2,801.39
e because of

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Document Page 34 of 57

Fill in this info	rmation to identify your	case:			
Debtor 1	Gina M. James-S				
Bosto	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official For					
Declara	tion About a	an Individual	Debtor's Sc	hedules	12/15
years, or both.	ey or property by fraud i 18 U.S.C. §§ 152, 1341, 1 gn Below		kruptcy case can result i	n fines up to \$250,000,	or imprisonment for up to 20
Did you p	ay or agree to pay some	one who is NOT an attor	rney to help you fill out b	eankruptcy forms?	
■ No					
☐ Yes.	Name of person				ptcy Petition Preparer's Notice, nd Signature (Official Form 119)
	alty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules file	d with this declaration a	and
X /s/ Gi	na M. James-Skrobo		X		
	M. James-Skrobo ure of Debtor 1		Signature of	Debtor 2	

Date _____

Date **April 5, 2018**

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Document Page 35 of 57

Fil	l in this infor	nation to identify you	r case:				
_	btor 1	Gina M. James-S					
De	DIOI I	First Name	Middle Name	L	_ast Name		
	btor 2 buse if, filing)	First Name	Middle Name	L	_ast Name		
		nkruptcy Court for the:	NORTHERN DISTRICT				
		initiapley Court for the.	- TOTALIST BIOTAGE	01 122111			
	se number nown)					_	theck if this is an mended filing
	ficial Fo		Affairs for Indivi	duals	Filing for B	ankruptcy	4/16
info nur	ormation. If n	nore space is needed, n). Answer every ques	attach a separate sheet to stion.	this for	m. On the top of any	equally responsible for sup y additional pages, write you	
Pa			rital Status and Where Yo	u Livea E	зетоге		
1.	What is you	r current marital statu	IS?				
	☐ Married Not ma						
2.	During the l	ast 3 years, have you	lived anywhere other than	where y	ou live now?		
	■ No □ Yes. Lis	st all of the places you li	ived in the last 3 years. Do r	not includ	e where you live now	<i>ı</i> .	
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there		Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat						ity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (C	Official Fo	rm 106H).		
_					,		
Pa	rt 2 Expla	in the Sources of You	r Income				
4.	Fill in the tot	al amount of income yo	nployment or from operation or eceived from all jobs and have income that you receive	all busine	esses, including part-		ndar years?
	□ No						
	Yes. Fi	I in the details.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	(befo	re deductions and sions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips		\$21,272.59	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business			☐ Operating a business	

Official Form 107

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Page 36 of 57 Case number (if known) Document

Debtor 1 Gina M. James-Skrobo

			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
		et calendar year: ary 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$75,574.00	☐ Wages, commissions, bonuses, tips		
			☐ Operating a business		☐ Operating a business		
		e calendar year before that: ary 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$78,421.00	☐ Wages, commissions, bonuses, tips		
			☐ Operating a business		☐ Operating a business		
For the calendar year: (January 1 to December 31, 2015)			■ Wages, commissions, bonuses, tips	\$28,601.00	☐ Wages, commissions, bonuses, tips		
			☐ Operating a business		☐ Operating a business		
For the calendar year: (January 1 to December 31, 2014)			■ Wages, commissions, bonuses, tips		☐ Wages, commissions, bonuses, tips		
			☐ Operating a business		☐ Operating a business		
 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployme and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lotter winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. 							
			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and	Sources of income Describe below.	Gross income (before deductions and exclusions)	

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

ì.	Are either I	Debtor 1's o	r Debtor	' 2's debts	primaril	y consumer	debts?
----	--------------	--------------	----------	-------------	----------	------------	--------

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an □ No. individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main

Page 37 of 57
Case number (if known) Document Debtor 1 Gina M. James-Skrobo

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pay	ment for
7.	Within 1 year before you filed for bankrupte Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No Yes. List all payments to an insider.	ortners; relatives of any gen control, or owner of 20% of	neral partners; partnor more of their votin	erships of which yong securities; and ar	u are a general ny managing ag	partner; corporations gent, including one for
	☐ Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		•		ccount of a de	bt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment tor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency	•	Status of the	e case
10.	Within 1 year before you filed for bankrupton Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed,	foreclosed, garnis	hed, attached	, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	d			,
11.	 Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from yo accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. 				mounts from your	
	Creditor Name and Address	Describe the action the	e creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess	sion of an assigne	e for the benef	fit of creditors, a

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main

Page 38 of 57
Case number (if known) Document Debtor 1 Gina M. James-Skrobo

Pai	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts with a total value of more t	than \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankrupto No Yes. Fill in the details for each gift or contr	cy, did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Pai	t 6: List Certain Losses			
15.	or gambling?	y or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	Yes. Fill in the details.		Data of your	Value of preparty
	how the loss occurred	scribe any insurance coverage for the loss lude the amount that insurance has paid. List pending urance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfers			
16.	Within 1 year before you filed for bankruptcy consulted about seeking bankruptcy or pre	7, did you or anyone else acting on your behalf pay paring a bankruptcy petition? arers, or credit counseling agencies for services require		rty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	M.C. Law Group, P.C. 494 W. Boughton Road Suite 2A Bolingbrook, IL 60440 support@mclawgroup.net	Attorney Fees		\$1,000.00
17.	promised to help you deal with your creditor Do not include any payment or transfer that you —		or transfer any prope	rty to anyone who
	No Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Page 39 of 57
Case number (if known) Document

Debtor 1 Gina M. James-Skrobo

18.	thin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other nsferred in the ordinary course of your business or financial affairs? Elude both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your lude gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and property transfer		payme	ibe any property or ents received or debts n exchange	Date transfer was made	5
	Person's relationship to you						
19.	Within 10 years before you filed for bankrupte beneficiary? (These are often called asset-protein No		ny property to a s	self-settle	d trust or similar device	of which you are a	
	Yes. Fill in the details.						
	Name of trust	Description and	value of the prop	erty trans	sferred	Date Transfer wa made	S
Dar	t 8: List of Certain Financial Accounts, Inst	ruments Safe Denosi	t Boyes and Sto	rage Unit	e		
ı aı	List of Certain Financial Accounts, inst	ruments, sale beposi	t boxes, and Sto	rage offic	5		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or	•					
	houses, pension funds, cooperatives, associ No Yes. Fill in the details.	ations, and other fina	ncial institutions	•			
		Last 4 digits of	Type of accour	nt or	Date account was	Last balanc	۰.
		account number	instrument	iit Oi	closed, sold, moved, or transferred	before closing o	or
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed fo	r bankruptcy, any	y safe dep	posit box or other deposi	tory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or	place other than you	r home within 1 y	ear befor	e you filed for bankrupto	y?	
	■ No □ Yes. Fill in the details.						
		Who also has ar	had agong	Docaribo	the contents	Do you still	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control fo	or Someone Else					
23.							
	■ No □ Yes. Fill in the details.						
	Owner's Name	Where is the prop	perty?	Describe	the property	Valu	ıe
	Address (Number, Street, City, State and ZIP Code)	(Number, Street, City, Code)	State and ZIP				
Par	t 10: Give Details About Environmental Infor	mation					
For	the purpose of Part 10, the following definition	ns apply:					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Case 18-09975 Doc 1 Page 40 of 57
Case number (if known) Document

Debtor 1 Gina M. James-Skrobo

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an enterman of an enterman of site and s							
■ No □ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it Environmental law, if you know it							
 ☐ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it 25. Have you notified any governmental unit of any release of hazardous material? 	u Date of notice						
Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it Environmental law, if you know it No	u Date of notice						
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Lip Code) Address (Number, Street, City, State and ZIP Code) No	u Date of notice						
■ No							
_ '''							
i ros. i in ili tile uctalis.							
Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it ZIP Code)	u Date of notice						
26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settle	ements and orders.						
■ No □ Yes. Fill in the details.							
Case Title Court or agency Nature of the case	Status of the						
Case Number Name Address (Number, Street, City, State and ZIP Code)	case						
Part 11: Give Details About Your Business or Connections to Any Business	, and the second						
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connection	ns to any business?						
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
☐ A partner in a partnership							
☐ An officer, director, or managing executive of a corporation							
☐ An owner of at least 5% of the voting or equity securities of a corporation							
No. None of the above applies. Go to Part 12.							
☐ Yes. Check all that apply above and fill in the details below for each business.							
Business Name Describe the nature of the business Employer Identification Do not include Social S							
(Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper	-						
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your busines							
institutions, creditors, or other parties.							
■ No							
Yes. Fill in the details below.							
Name Address (Number, Street, City, State and ZIP Code)							

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Page 41 of 57
Case number (if known) Document

Debtor 1 Gina M. James-Skrobo

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Gina M. James-Ski	30	
Gina M. James-Skrob	Signature of Debtor 2	
Signature of Debtor 1		
Date April 5, 2018	Date	
Did you attach additional	ages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107))?
■ No		
☐ Yes		
Did you pay or agree to p	someone who is not an attorney to help you fill out bankruptcy forms?	
■ No		
☐ Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$1,000.00 toward the flat fee, leaving a balance due of \$3,000.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:April_5, 2018	again to appear in court to object.	
Signed:		
/s/ Gina M. James-Skrobo	/s/ Molly C. Stojanov	
Gina M. James-Skrobo	Molly C. Stojanov	
	Attorney for the Debtor(s)	
Debtor(s)		
Do not sign this agreement if the amo	ounts are blank.	

Local Bankruptcy Form 23c

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Document Page 52 of 57

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Gina M. James-Skrobo		Case No.	
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMP	ENSATION OF ATTOR	RNEY FOR DE	CBTOR(S)
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the five rendered on behalf of the debtor(s) in contemplation	iling of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		s	4,000.00
	Prior to the filing of this statement I have received	ed	\$	1,000.00
				3,000.00
2. 7	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed con	mpensation with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the			
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects	s of the bankruptcy c	ase, including:
t c	 Analysis of the debtor's financial situation, and rerection. Preparation and filing of any petition, schedules, sometimes. Representation of the debtor at the meeting of credit. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the secured creditors of the secured creditors of the secured creditors to reaffirmation agreements and applications. 	tatement of affairs and plan which ditors and confirmation hearing, an o reduce to market value; exe tions as needed; preparation	may be required; and any adjourned hear mption planning;	rings thereof; preparation and filing of
5. I	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any of any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of ankruptcy proceeding.	any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
Α	pril 5, 2018	/s/ Molly C. Stojar	nov	
D	ate	Molly C. Stojanov Signature of Attorne M.C. Law Group, 494 W. Boughton Suite 2A Bolingbrook, IL 6 (630) 312-8677 F	y P.C. Road 0440	
		support@mclawg		
		Name of law firm		

Case 18-09975 Doc 1 Filed 04/05/18 Entered 04/05/18 12:57:28 Desc Main Document Page 53 of 57

M.C. LAW GROUP, P.C.

494 W. BOUGHTON ROAD, SUITE 2A, BOLINGBROOK, IL 60440, Phone: 630-312-8677 Fax: 630-914-5309

Chapter 13 Retainer Agreement

CLIENT(S): 6100 SK000

FEES:

Attorney Fee: \$ 4000 Court Filing Fee: \$ 310.00

Attorney Retainer Fee of \$ 1310.00, remaining balance of \$ 5,000 . \$ 13/0 to be paid prior to case filing, with a balance of \$ 5,000 , to be paid through the Chapter 13 plan.

• I understand if I decide to discontinue our services at any time, I would be entitled to a refund of unearned fees. If your case is not filed, you authorize counsel to apply funds held in a trust account toward payment of outstanding attorney fees.

PLAN:

• Estimated trustee payment: \$ to \$ per month for months.

• Plan payments are only an estimate until confirmed by the Court.

• If income or expenses should change during Chapter 13, plan payments may change.

AGREEMENTS:

I understand that I must attend a mandatory Meeting of Creditors as provided under Section 341 approximately 4 to 6 weeks
after my case is filed. Failure to appear at meetings, or produce documents requested may result in the withdrawal of counsel
or the dismissal of my case.

Plan payments include all unsecured debt given by me to M.C. Law Group, any currently financed vehicles, and any mortgage arrears. Current mortgage payments are to be made outside of the Chapter 13 plan. Student loans are also made

- I have been advised that I am required to complete a credit counseling course before my case is filed and a debt management course (before the discharge of my case) after my case is filed.
- I have been advised that I cannot transfer any property or incur any debt without express permission of my attorney/Court.
- I have been advised that a Chapter 13 cannot save my real estate if my property taxes have been sold and the redemption period has expired.
- I have been advised that I must obtain court permission to sell, purchase, or refinance any real estate.
- I have been advised that if I am eligible to receive a tax refund during my Chapter 13, I may have to turn it over to the Chapter 13 Trustee if advised to do so.
- I have been advised that I am not required to hire an attorney to file a bankruptcy and that I choose to do so voluntarily.
- I have been advised that M.C. Law Group is a Debt Relief Agency under the New Bankruptcy Act.

Date: 4.4.2018

x Min M. James Sprift

Debtor

X Joint Debtor

X Molly C. Stoyanov

Attorney

outside of the plan, unless instructed to do otherwise.

United States Bankruptcy Court Northern District of Illinois

In re	Gina M. James-Skrobo		Case No.	
		Debtor(s)	Chapter13	
	VEF	RIFICATION OF CREDITOR MA	TRIX	
		Number of C	reditors:	23
	The above-named Debtor(s) l (our) knowledge.	nereby verifies that the list of creditor	rs is true and correct to	the best of my
Date:	April 5, 2018	/s/ Gina M. James-Skrobo Gina M. James-Skrobo Signature of Debtor		

ATI Physical Therapy PO Box 371863 Pittsburgh, PA 15250

Capital One Po Box 30281 Salt Lake City, UT 84130

Chase Card Po Box 15298 Wilmington, DE 19850

Chase Card Po Box 15298 Wilmington, DE 19850

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850

Electrostim
3504 Cragmont Dr.
Tampa, FL 33619

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Med Busi Bur 1460 Renaissance Dr Park Ridge, IL 60068

Med Busi Bur 1460 Renaissance Dr Park Ridge, IL 60068

Med Busi Bur 1460 Renaissance Dr Park Ridge, IL 60068

Med Busi Bur 1460 Renaissance Dr Park Ridge, IL 60068 Med Busi Bur 1460 Renaissance Dr Park Ridge, IL 60068

Med Busi Bur 1460 Renaissance Dr Park Ridge, IL 60068

Med Busi Bur 1460 Renaissance Dr Park Ridge, IL 60068

Med Busi Bur 1460 Renaissance Dr Park Ridge, IL 60068

Midwest Diagnostic Pathology PO Box 578 Park Ridge, IL 60068

Nelnet Loans 6420 Southpoint Pkwy Jacksonville, FL 32216

Nelnet Loans 6420 Southpoint Pkwy Jacksonville, FL 32216

Sears/cbna Po Box 6282 Sioux Falls, SD 57117

Suntrust Po Box 791144 Baltimore, MD 21279

Valic Financial Services 500 W. Madison #2850 Chicago, IL 60661

Valic Financial Services 500 W. Madison #2850 Chicago, IL 60661

Western Hills Medical 4700 95th St. Suite 103 Oak Lawn, IL 60453